Fill in this information to identify your case:				
Debtor 1 John Jacobs		Chec	ck if this is:	
Debtor 2 Erin Jacobs		_	An amended filing	ving postpetition chapter
(Spouse, if filing)			13 expenses as of	
United States Bankruptcy Court for the: EASTERN DISTRICT OF PENNS	SYLVANIA	-	MM / DD / YYYY	
Case number (If known) 21-10793				
Official Form 106J				
Schedule J: Your Expenses				12/1
Be as complete and accurate as possible. If two married people al information. If more space is needed, attach another sheet to this number (if known). Answer every question.  Part 1: Describe Your Household  1. Is this a joint case?  No. Go to line 2.	form. On the top of any	additio	onal pages, write y	our name and case
Yes. Does Debtor 2 live in a separate household?				
<ul><li>■ No</li><li>☐ Yes. Debtor 2 must file Official Form 106J-2, Expenses</li></ul>	s for Separate Household	of Deb	tor 2.	
2. Do you have dependents? ☐ No				
Do not list Debtor 1 and Debtor 2. Fill out this information for each dependent	Dependent's relationsh Debtor 1 or Debtor 2	ip to	Dependent's age	Does dependent live with you?
Do not state the				□ No
dependents names.	son		16	Yes
	000		40	□ No
	son			■ Yes □ No
				☐ Yes
				□ No
3. Do your expenses include expenses of people other than yourself and your dependents? ■ No □ Yes				☐ Yes
Estimate Your Ongoing Monthly Expenses Estimate your expenses as of your bankruptcy filing date unless y expenses as of a date after the bankruptcy is filed. If this is a supplicable date.				
Include expenses paid for with non-cash government assistance the value of such assistance and have included it on <i>Schedule I:</i> (Official Form 106I.)			Your exp	enses
The rental or home ownership expenses for your residence. I payments and any rent for the ground or lot.	Include first mortgage	4. \$	·	950.00
If not included in line 4:				
4a. Real estate taxes		4a. \$		0.00
4b. Property, homeowner's, or renter's insurance		4b. \$		0.00
4c. Home maintenance, repair, and upkeep expenses		4c. \$		400.00
<ul><li>4d. Homeowner's association or condominium dues</li><li>5. Additional mortgage payments for your residence, such as he</li></ul>	ome equity loops	4d. \$		0.00 0.00

## Case 21-10793-pmm Doc 22 Filed 05/30/21 Entered 05/30/21 12:02:46 Desc Main Document Page 2 of 2

	ohn Jacobs rin Jacobs	Case num	per (if known)	21-10793
. Utilities	:			
6a. El	lectricity, heat, natural gas	6a.	\$	350.00
6b. W	ater, sewer, garbage collection	6b.	\$	250.00
	elephone, cell phone, Internet, satellite, and cable services	6c.	\$	550.00
	ther. Specify:	6d.	\$	0.00
	nd housekeeping supplies	7.	\$	900.00
Childca	re and children's education costs	8.	\$	0.00
•	g, laundry, and dry cleaning	9.	\$	400.00
). Persona	al care products and services	10.	\$	200.00
. Medical	and dental expenses	11.	\$	630.00
	ortation. Include gas, maintenance, bus or train fare.	40	Φ.	600.00
	nclude car payments.	12.	•	
	inment, clubs, recreation, newspapers, magazines, and books	13.	\$	150.00
	ble contributions and religious donations	14.	\$	260.00
i. Insuran				
	nclude insurance deducted from your pay or included in lines 4 or 20. fe insurance	15a.	¢	0.00
	ealth insurance	15a. 15b.		0.00
	ehicle insurance		\$	325.00
	ther insurance. Specify:	15d.	Ф	0.00
Specify:	Do not include taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
	ent or lease payments:		•	
	ar payments for Vehicle 1	17a.	·	0.00
	ar payments for Vehicle 2	17b.		0.00
	ther. Specify:		\$	0.00
	ther. Specify:	17d.	\$	0.00
	syments of alimony, maintenance, and support that you did not report as	18.	\$	0.00
	ed from your pay on line 5, Schedule I, Your Income (Official Form 106I). ayments you make to support others who do not live with you.		\$	0.00
Specify:	• • • • • • • • • • • • • • • • • • • •	19.	Ψ	0.00
	eal property expenses not included in lines 4 or 5 of this form or on Sche		ur Income	
	ortgages on other property	20a.		0.00
	eal estate taxes	20b.	·	0.00
	roperty, homeowner's, or renter's insurance	20c.	·	0.00
	aintenance, repair, and upkeep expenses	20d.		0.00
	omeowner's association or condominium dues	20e.		0.00
. Other: 9		21.	·	225.00
	expenses, school activities		+\$	200.00
			·Ψ	200.00
	te your monthly expenses		¢.	0.000.00
	d lines 4 through 21.		\$	6,390.00
	py line 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add	d line 22a and 22b. The result is your monthly expenses.		\$	6,390.00
	te your monthly net income.			
	opy line 12 (your combined monthly income) from Schedule I.	23a.	· ·	7,104.81
23b. C	opy your monthly expenses from line 22c above.	23b.	-\$	6,390.00
	ubtract your monthly expenses from your monthly income.		Φ.	744.04
Tł	ne result is your monthly net income.	23c.	<b>Þ</b>	714.81

## 24. Do you expect an increase or decrease in your expenses within the year after you file this form?

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

☐ Yes.

Explain here: For Medical

Debtors spend yearly/monthly for glasses, braces, prescriptions, vitamins, son had ACL replaced, son has disabilit with ADHD medications, blood pressure medications, payments toward meeting deductible.

For Church

Donations to Food banks and St. John's of Mohton, offerings.